



TTW

Docket No.: M4065.0369/P369-A  
(PATENT)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Patent Application of:  
Shane J. Trapp

Application No.: 10/006,704

Confirmation No.: 3229

Filed: December 10, 2001

Art Unit: 1765

For: METHOD AND COMPOSITION FOR  
PLASMA ETCHING OF A SELF-ALIGNED  
CONTACT OPENING

Examiner: L. T. Umez Eronini

**RESPONSE TO NON-FINAL OFFICE ACTION**

MS Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

**INTRODUCTORY COMMENTS**

In response to the Office Action dated December 13, 2006, please reconsider the above-identified U.S. patent application as follows:

**A Listing of the Claims** begins on page 2 of this paper.

**Remarks** begin on page 4 of this paper.



<b>AMENDMENT TRANSMITTAL LETTER</b>				Docket No. M4065.0369/P369-A	
Application No. 10/006,704-Conf. #3229		Filing Date December 10, 2001		Examiner E. L. T. Umez	Art Unit 1765
Applicant(s): Shane J. Trapp					
Invention: METHOD AND COMPOSITION FOR PLASMA ETCHING OF A SELF-ALIGNED CONTACT OPENING					
<b>TO THE COMMISSIONER FOR PATENTS</b>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
<b>Total Claims</b>	7	- 40 =	0	x 50.00	0.00
<b>Independent Claims</b>	3	- 6 =	0	x 200.00	0.00
<b>Multiple Dependent Claims (check if applicable)</b> <input type="checkbox"/>					
<b>Other fee (please specify):</b>					
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>					0.00
<input checked="" type="checkbox"/> Large Entity			<input type="checkbox"/> Small Entity		
<input type="checkbox"/> No additional fee is required for this amendment.					
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.					
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>04-1073</u> as described below. A duplicate copy of this sheet is enclosed.					
<input type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
<u>Thomas J. D'Amico</u> Thomas J. D'Amico Attorney/Agent Reg. No.: 28,371					
Dated: <u>March 9, 2007</u>					
DICKSTEIN SHAPIRO LLP 1825 Eye Street, NW Washington, DC 20006-5403 (202) 420-2232					